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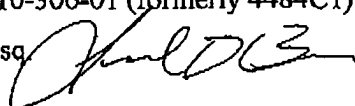
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FACSIMILE TRANSMISSION COVERSHEET

DATE: August 2, 2005

TO: Examiner Alexander Stephan NOGUEROLA  
Group Art Unit 1753  
Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

RE: U.S. Patent Application No. 10/075,404  
Filed: February 13, 2002  
Confirmation No.: 8150  
Attorney Docket No.: 5010-306-01 (formerly 4484C1)

FROM: Leonard D. Bowersox, Esq. 

FAC. NO.: (571) 273-8300

NUMBER OF PAGES (INCLUDING THIS COVER SHEET): 14

Items Attached: Transmittal Form 1 Page  
Petition for Extension of Time Form 1 Page  
Fee Transmittal Form 1 Page  
Credit Card Payment Form 1 Page  
Amendment 9 Pages

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April D. Brandon

Printed Name:

  
Signature

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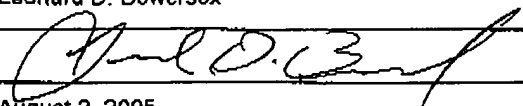
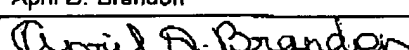
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PTO/SB/21 (08-00)

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|   |  |   |                             |                               |
|---|--|---|-----------------------------|-------------------------------|
| <b>TRANSMITTAL<br/>FORM</b><br><i>(to be used for all correspondence after initial filing)</i>  |  | Application Number  | 10/075,404                  |                               |
|   |  | Filing Date   | February 13, 2002           |                               |
|   |  | First Named Inventor  | Ben F. JOHNSON              |                               |
|   |  | Group Art Unit  | 1753                        |                               |
|   |  | Examiner Name   | Alexander Stephan NOGUEROLA |                               |
| Total Number of Pages in This Submission  |  | 13  | Attorney Docket Number      | 5010-306-01 (formerly 4484C1) |
| <b>ENCLOSURES (check all that apply)</b>  |  |   |                             |                               |
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |  | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s)<br><input type="checkbox"/> After Allowance Communication to Group |                             |                               |
|   |  | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Acknowledgement Postcard<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Credit Card Payment Form for \$1,020.00.   |                             |                               |
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| Remarks   |  |   |                             |                               |
| <b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>   |  |   |                             |                               |
| Firm or Individual name   | Leonard D. Bowersox  |   |                             |                               |
| Signature   |  |   |                             |                               |
| Date  | August 2, 2005   |   |                             |                               |
| <b>CERTIFICATE OF MAILING</b>   |  |   |                             |                               |
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| Type or printed name  | April D. Brandon   |   |                             |                               |
| Signature   |   | Date  | August 2, 2005              |                               |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04)

Approved for use through 07/31/2008. OMB 0651-0032

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Effective on 12/8/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**  
**For FY 2005****Complete if Known**

|  |                      |                               |
|--|----------------------|-------------------------------|
| <input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27 | Application Number   | 10/075,404                    |
|  | Filing Date          | February 13, 2002             |
|  | First Named Inventor | Ben F. JOHNSON et al.         |
|  | Examiner Name        | Alexander Stephan NOGUEROLA   |
|  | Art Unit             | 1753                          |
| <b>TOTAL AMOUNT OF PAYMENT</b>   | <b>(S) 1,020.00</b>  | Attorney Docket No.           |
|  |                      | 5010-308-01 (formerly 4484C1) |

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 50-0925 Deposit Account Name: Kilyk & Bowersox, P.L.L.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description   | Fee (\$) | Small Entity Fee (\$) |
|---|----------|-----------------------|
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent            | 50       | 25                    |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200      | 100                   |
| Multiple dependent claims   | 360      | 180                   |

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|----------|---------------|---------------------------|----------|---------------|
| - 20 or HP = | x            | =        |               |                           |          |               |

HP = highest number of total claims paid for, if greater than 20

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|---------------|--------------|----------|---------------|
| - 3 or HP =   | x            | =        |               |

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 =      | / 50 =       | (round up to a whole number) x                   | =        |               |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: Petition for Extension of Time Under 37 C.F.R. 1.136(a)(3)

Fees Paid(\$)

1,020.00

**SUBMITTED BY**

|                                       |                         |                        |
|---------------------------------------|-------------------------|------------------------|
| Signature                             | Registration No. 33,226 | Telephone 703-385-9888 |
| Name (Print/Type) Leonard D. Bowersox | (Attorney/Agent)        | Date August 2, 2005    |

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April D. Brandon  
Name (Print)

Signature